

# National Update

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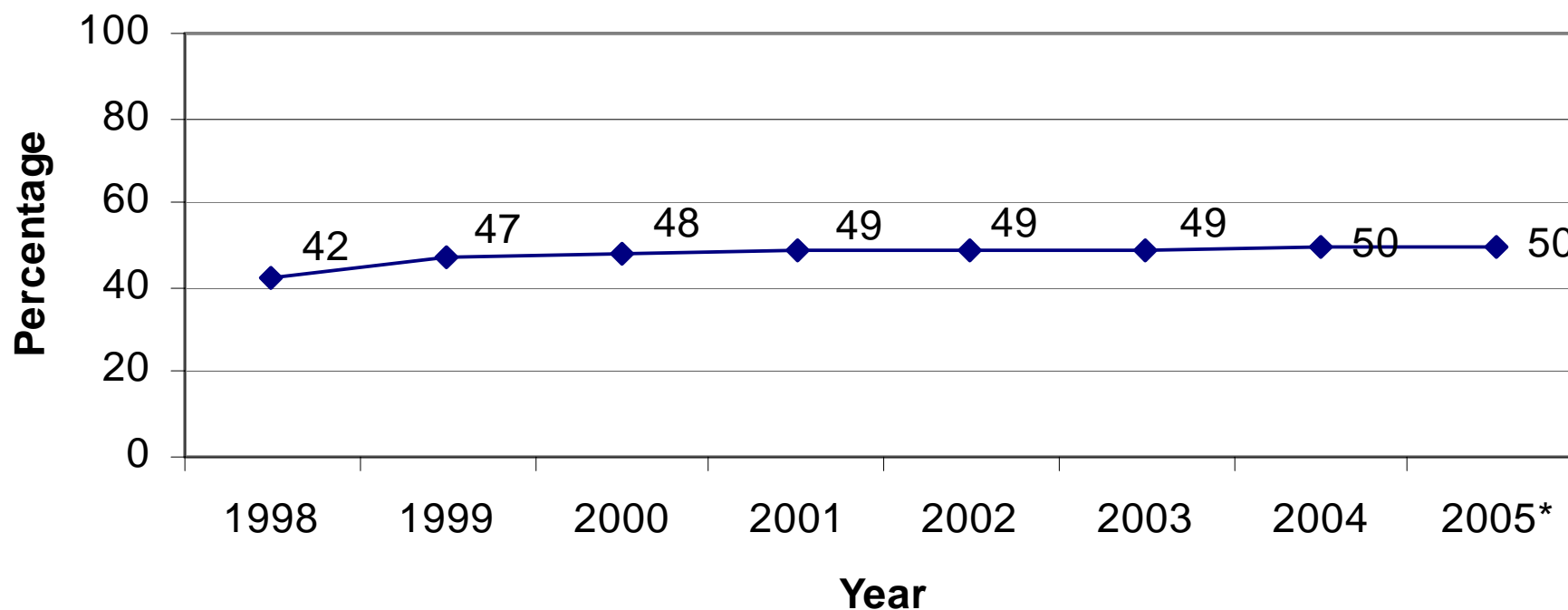


# Overview

- National program data trends
- 2008 Program Requirements review
- 2008 IPOM
- Guide to Life overview

# Identified Births vs Expected Births to HBsAg-Positive Women (US)

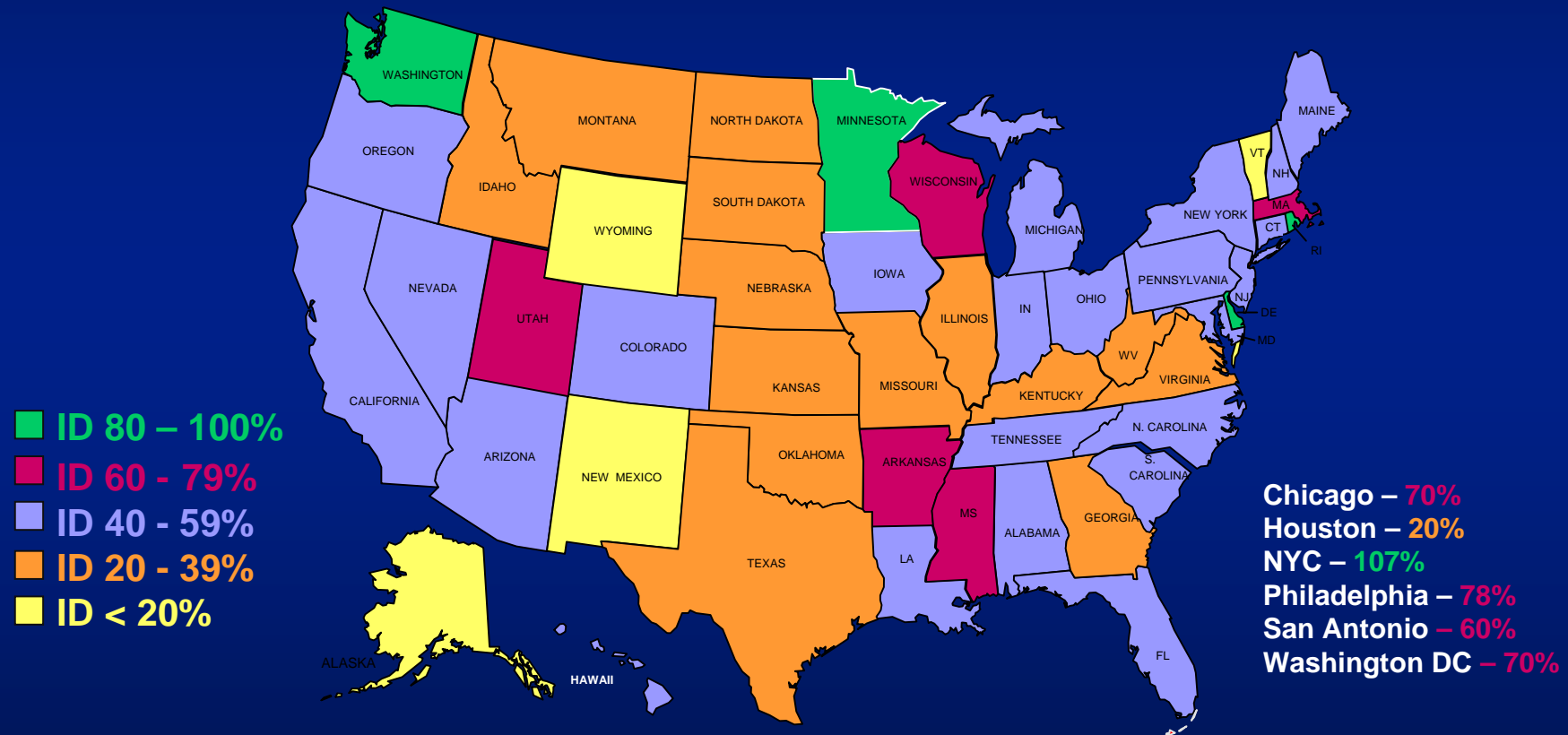
Identified Births vs Expected Births



\*2005 data is preliminary until 2005 expected births are calculated



# Identified Births vs Expected Births to HBsAg-positive Women, 2005\*

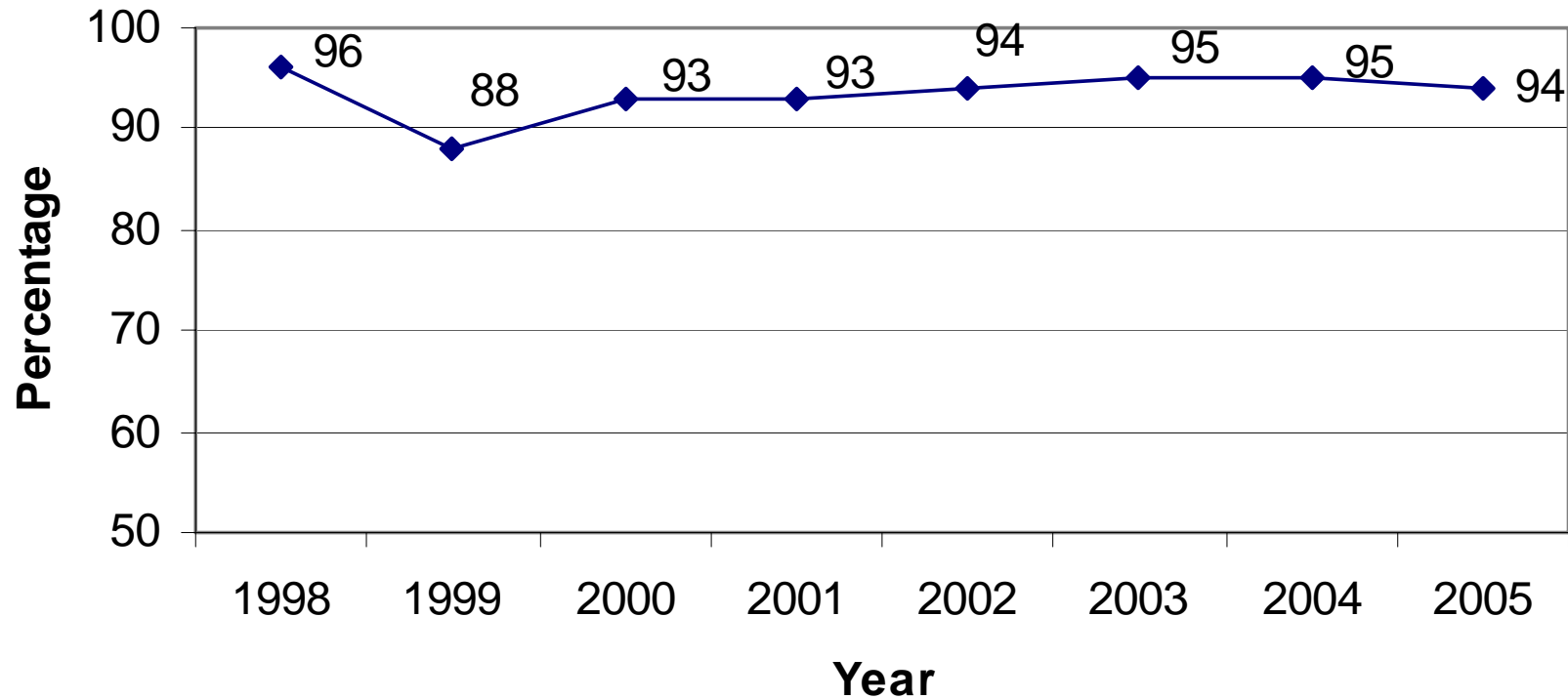


Source, 2004 CDC Perinatal Hepatitis B Prevention Program Point Estimates and 2005 Annual Assessment Of Progress Towards Goals to Prevent Perinatal HBV Transmission

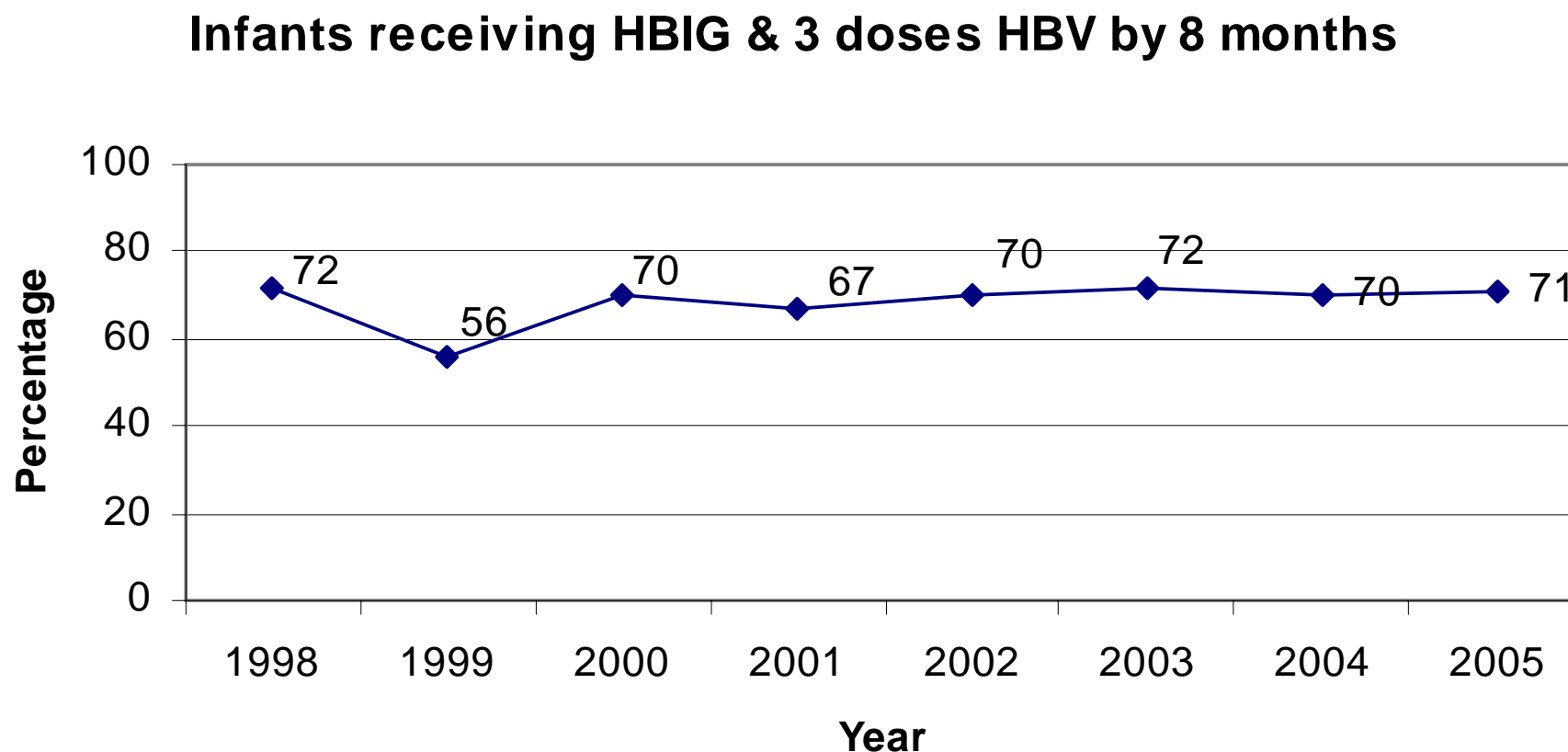


## Case Management- 1<sup>st</sup> dose of HBV & HBIG (US)

**Infants Receiving HBIG & 1st Dose of HBV at Birth**

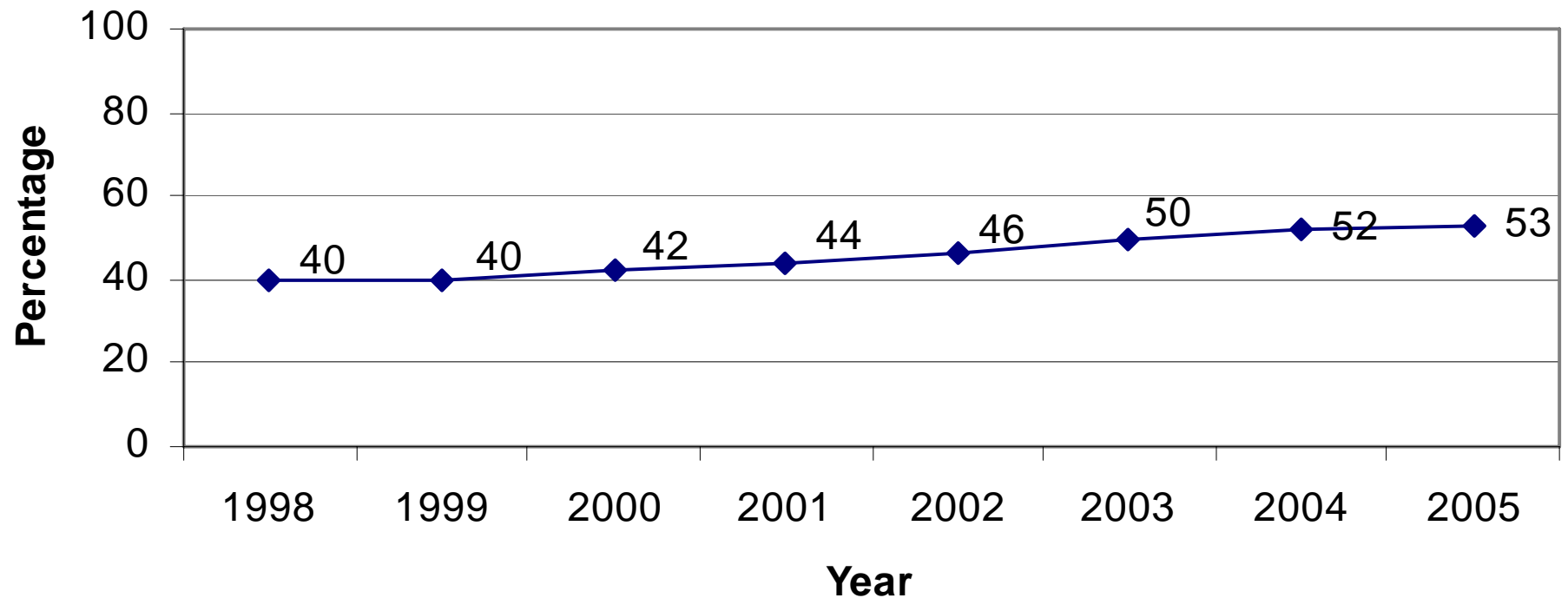


# Case Management- HBIG & 3 doses HBV by 8 months (US)



# Case Management- Serologic Testing (US)

## Infants Receiving Serologic Testing



# Case Management- Household & Sexual Contacts

During management of infants born in  
2005

- 12,670 contacts were identified
- Of these contacts:
  - 12% were infected
  - 38% were immune
  - 22% were susceptible



# Case Management- Household & Sexual Contacts (cont'd)

During management of infants born in  
2005

- 2050 contacts received dose one of hepatitis B vaccine
- 1859 contacts received dose two of hepatitis B vaccine
- 1701 contacts received dose three of hepatitis B vaccine

# 2008 Immunization Program Requirements- Perinatal Hepatitis B Prevention

1. Establish a mechanism to identify all HBsAg-positive pregnant women.
2. Conduct case management of all identified infants at risk of acquiring perinatal hepatitis B infection which includes
  - administration of appropriate immunoprophylaxis is administered to all infants born to HBsAg-positive women [including hepatitis B immune globulin (HBIG), hepatitis B vaccine birth dose, and complete vaccine series].
  - completion of post-vaccination serologic testing of all infants born to HBsAg-positive women and reporting of all HBsAg-positive infants to CDC through the National Notifiable Disease Surveillance System (NNDSS).



## 2008 Immunization Program Requirements- Perinatal Hepatitis B Prevention (cont'd)

3. Evaluate completeness of identification of HBsAg-positive pregnant women, case management, reporting of HBsAg-positive infants, and appropriate care of infants born to HBsAg-unknown status mothers based on methodology provided by CDC.
4. Develop and examine feasibility to implement a state plan to put into practice a universal reporting mechanism with documentation of maternal HBsAg test results for all births.
5. Work with hospitals to achieve universal birth dose coverage and documentation of the birth dose in an IIS.



# 2008 Immunization Program Operations Manual (IPOM)

- IPOM provides guidance on activities grantees should use to achieve the program requirements
- The 2008 IPOM is meant to be used during the upcoming grant cycle (2008-2012) to assist grantees in writing their grants

## Guide to Life

- The Guide to Life has been updated from the original, 1996 version
- The text has been streamlined and updated to reflect the maturity of the program
- More detailed information on program evaluation has been added
- The manual will be posted on the DVH website soon



## Guide to Life (cont'd)

Manual is divided into following chapters:

1. Case identification and management
2. Establishing Program Goals and Evaluating Your Program
3. Engaging Stakeholders to Strengthen Your Program
4. Education and Outreach

